

CLERK US DISTRICT COURT
NORTHERN DISTRICT OF TEXAS
FILEDUNITED STATES DISTRICT COURT
FOR THE NORTHERN DISTRICT OF TEXAS

2019 AUG 16 PM 12:19

DIVISION

DEPUTY CLERK

Plaintiff

v. ASAP

Defendant

Amendment of existing case
3-19-cv-1743 N - A Terrorist attack on kids
TRAJEE RAO & KUSHAL RAO & MANGNA DEVARBHAKTANI
KIDS ARE BEING HARASSED BY CPSS & ex husband
by cheating me. I do need to get my kids back
3-19-cv-1743 N

GOVERNMENT, HOME LAND SECURITY, IR, Case Number Benton County,
NEW YORK LIFE, UBER, FRISCO POLICE DEPARTMENT, ICE TEAM,
DEPARTMENT OF FAMILY PROTECTION SERVICES, CONCENTRA,
NORTH RICH LAND HILLS HEALTHMARKETS, SELECT MEDICAL HOSPITAL

It's a terrorist attack on a family who is
nothing bad. Trajee Rao, Kushal Rao and
Mangna Devabhaktani.

It started in Nov 2017 by a manager
called Mark Powell, Nirmala Reddy, Alex Kiyabu,
Cindy Hernandez and other people around because
of me following the religion as per religion of Basden
and also race being indian.

*Attach additional pages as needed

Date 08/16/2019

Signature [Signature]

Print Name DEVABHAKTANI MANGNA

Address 2355 LEBANON RD, #2107, FRISCO, TX 75034

City, State, Zip FRISCO, TEXAS 75034

Telephone 469-978-4941

There is a sexual harassment done on me in New York life by two colleagues in last one year which is very illegal and harassing. The same thing happened in concentration and health markets for me being more religious and spiritual. Based on how the situation is primrose talk hill school and Rohan Kumar Sani and CPs started killing me and separating my kids and harassing me. Lot of illegal things happened on me for the last 7 days when it had to be colleagues in New York life started harassing me too. I am in need of seeing US government for not handling the situation as this situation started on 01/06/2019 soon after I got citizenship on 12/10/2018. Colleagues from New York life are Daniel Johnson and William Pearce. I need to see iPhone, calendar, YouTube, Google and Kluge too. I need to see hospital & ER about 10 of them along with the other ones Raven Darrell, Kavitha gingepalli, Raj, gingepalli, Savitri Marella Crime Investigation Center, Domestic Violence Case Center.

Hospitals in Dallas are feeding drugs to
patients illegally and forcibly with out following
patient rights and patient concerns.

Hospitals are dressing up illegally.

I need to see movie theaters for playing illegal
movies like ^{like toilet seats} I need to see on New York life for
not securing their company as per Federal
government rules and forcing level care by
creating for not helping the community.

THE UNITED STATES OF AMERICA

No. 40728091

CERTIFICATE OF NATURALIZATION

Personal description of holder
as of date of naturalization:

Date of birth: JULY 06, 1979

Sex: FEMALE

Height: 5 feet 5 inches

Marital status: DIVORCED

Country of former nationality:
INDIA

U.S.G.S Registration No. A087354501

I certify that the description given is true, and that the photograph affixed
hereto is a likeness of me.

Manogna Devabhaktuni
(Complete and true signature of holder)

Be it known that, pursuant to an application filed with the Secretary of
Homeland Security

at: IRVING, TEXAS

The Secretary having found that:

MANOGNA DEVABHAKTUNI

residing at: FRISCO, TEXAS

having complied in all respects with all of the applicable provisions of the
naturalization laws of the United States, being entitled to be admitted as
a citizen of the United States, and having taken the oath of allegiance at a
ceremony conducted by

U.S. CITIZENSHIP AND IMMIGRATION SERVICES

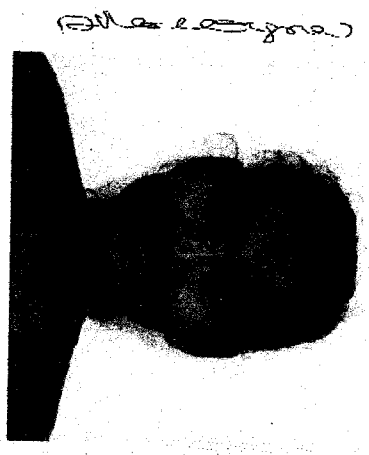
at: IRVING, TEXAS

on: DECEMBER 10, 2018

such person is admitted as a citizen of the United States of America.

2.FAC

U. S. Citizenship and Immigration Services



ALTERATION OR MISUSE OF THIS DOCUMENT IS
A FEDERAL OFFENSE AND PUNISHABLE BY LAW

DEPARTMENT OF HOMELAND SECURITY

CERTIFICATION OF VITAL RECORD

STATE OF TEXAS

CERTIFICATE OF BIRTH

BIRTH NUMBER

1. Child's Name First: TRAYEE Middle: RAVI Last: COLLIN			2. Date of Birth (mm/dd/yyyy): 03/18/2011		3. Sex: FEMALE		
4a. Place of Birth - County: COLLIN		4b. City or Town (If outside city limits, give precinct no.): PLANO		5. Time of Birth: 10:12 AM		6a. Plurality - Single, Twin, Triplet, etc.: SINGLE	
7a. Place of birth <input type="checkbox"/> Clinic / Doctor's Office <input type="checkbox"/> Licensed Birthing Center <input checked="" type="checkbox"/> Hospital <input type="checkbox"/> Home Birth (Planned to deliver at home? <input type="checkbox"/> Yes <input type="checkbox"/> No) <input type="checkbox"/> Other (Specify):				7b. Name of Hospital or Birthing Center, NPI: (If Not Institution, Give Street Address) PRESBYTERIAN HOSPITAL OF PLANO			
8a. Attendant's Name, NPI, and Mailing Address ALVIN GEBERT 1600 COIT ROAD STE.210 PLANO, TEXAS 75075				8b. <input checked="" type="checkbox"/> MD <input type="checkbox"/> DO <input type="checkbox"/> CNM <input type="checkbox"/> Midwife <input type="checkbox"/> Other (Specify):			
9a. Certifier - I certify that this child was born alive at the place and time and on the date as stated. DIANA NAVARRO Signature and Title				9b. <input type="checkbox"/> Attendant <input checked="" type="checkbox"/> Facility Administrator / Designee <input type="checkbox"/> Other (Specify): 03/20/2011 Date Signed			
10. Mother's Name Prior to First Marriage First: MANOGNA Middle: DEVABHAKTUNI Last: DEVABHAKTUNI			11. Date of Birth (mm/dd/yyyy): 07/06/1979		12. Birthplace (State, Territory or Foreign Country): INDIA		
13a. Residence - State: TEXAS		13b. County: DENTON		13c. City, Town or Location: FRISCO		13d. Street Address or Rural Location: 12409 PLEASANT HILL LANE	
13e. Zip Code: 75034		13f. Inside City Limits: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		14. Mailing Address: <input checked="" type="checkbox"/> Same As Residence, or:			
15. Father's Name First: MOHAN Middle: KUMAR Last: RAVI			16. Date of Birth (mm/dd/yyyy): 08/23/1977		17. Birthplace (State, Territory or Foreign Country): INDIA		
18a. Local File Number: 07-2392		18b. Date Received by Local Registrar: 03/22/2011		18c. Signature of Local Registrar: <i>[Signature]</i>			

VS-111.3 REV. 01/05 WARNING: THE PENALTY FOR KNOWINGLY MAKING A FALSE STATEMENT IN THIS FORM CAN BE 2-10 YEARS IN PRISON AND A FINE OF UP TO \$5,000.

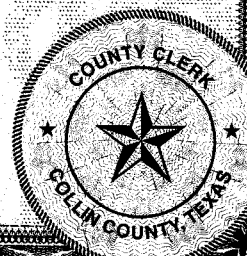
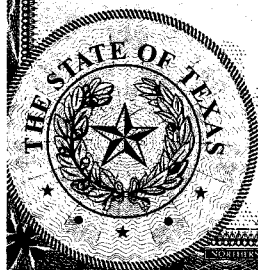
075955

State of Texas
County of Collin

I hereby certify that the foregoing is a true and correct copy of the original record as filed in this office.

Issued: *April 11, 2014*
By: *[Signature]*
State of Texas
County of Collin
Stacey Kemp, County Clerk
Collin County, Texas

365749



CERTIFICATION OF VITAL RECORD

STATE OF TEXAS

CERTIFICATE OF BIRTH

BIRTH NUMBER

1. Child's Name First: KUSHAL Middle: RAVI Last: COLLIN			2. Date of Birth (mm/dd/yyyy): 11/21/2013		3. Sex: MALE		
4a. Place of Birth - County: COLLIN		4b. City or Town (If outside city limits, give precinct no.): PLANO		5. Time of Birth: 02:11 AM		6a. Plurality - Single, Twin, Triplet, etc.: SINGLE	
7a. Place of birth <input type="checkbox"/> Clinic / Doctor's Office <input type="checkbox"/> Licensed Birthing Center <input type="checkbox"/> Home Birth (Planned to deliver at home? <input type="checkbox"/> Yes <input type="checkbox"/> No) <input type="checkbox"/> Other (Specify):		7b. Name of Hospital or Birthing Center, NPI: (If Not Institution, Give Street Address) PRESBYTERIAN HOSPITAL OF PLANO					
8a. Attendant's Name, NPI, and Mailing Address ALVIN GEBERT 1600 COIT ROAD STE.210 PLANO, TEXAS 75075				9a. Certifier - I certify that this child was born alive at the place and time and on the date as stated. LORETHE DENNIS Signature and Title: 11/23/2013 Date Signed			
8b. <input checked="" type="checkbox"/> MD <input type="checkbox"/> DO <input type="checkbox"/> CNM <input type="checkbox"/> Midwife <input type="checkbox"/> Other (Specify):				9b. <input type="checkbox"/> Attendant <input type="checkbox"/> Facility Administrator / Designee <input checked="" type="checkbox"/> Other (Specify): BIRTH REGISTRY			
10. Mother's Name Prior to First Marriage First: MANOGNA Middle: DEVABHAKTUNI Last: COLLIN			11. Date of Birth (mm/dd/yyyy): 07/06/1979		12. Birthplace (State, Territory or Foreign Country): INDIA		
13a. Residence - State: TEXAS		13b. County: DENTON		13c. City, Town or Location: FRISCO		13d. Street Address or Rural Location: 12409 PLEASANT HILL LANE	
13e. Zip Code: 75033		13f. Inside City Limits: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		14. Mailing Address: Same As Residence, or:			
15. Father's Name First: MOHAN Middle: KUMAR Last: RAVI			16. Date of Birth (mm/dd/yyyy): 08/23/1977		17. Birthplace (State, Territory or Foreign Country): INDIA		
18a. Local File Number: 0712431		18b. Date Received by Local Registrar: 11/27/2013		18c. Signature of Local Registrar: <i>Stacey Kemp</i>			

VS-111.3 REV. 01/05. WARNING: THE PENALTY FOR KNOWINGLY MAKING A FALSE STATEMENT IN THIS FORM CAN BE 2-10 YEARS IN PRISON AND A FINE OF UP TO \$5,000.

350230

State Of Texas
County of Collin

I hereby certify that the foregoing is a true and correct copy of the original record as filed in this office.

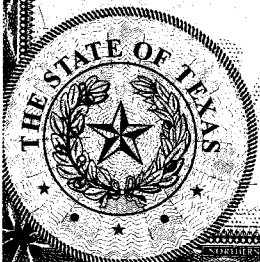
Issued:

By:

Stacey Kemp, County Clerk

Collin County, Texas

365748



I. (a) PLAINTIFFS

Attacks on
Traveller Pass, Kurdish Pass
for following Freedom of Religion

(b) County of Residence of First Listed Plaintiff

(EXCEPT IN U.S. PLAINTIFF CASES)

(c) Attorneys (Firm Name, Address, and Telephone Number)

DEFENDANTS

US Government
helping one need them safely,
Home based Security
US Government

County of Residence of First Listed Defendant

(IN U.S. PLAINTIFF CASES ONLY)

NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF THE TRACT OF LAND INVOLVED.

Attorneys (If Known)

II. BASIS OF JURISDICTION (Place an "X" in One Box Only)

- ☐ 1 U.S. Government Plaintiff
- ☒ 3 Federal Question (U.S. Government Not a Party)
- ☒ 2 U.S. Government Defendant
- ☒ 4 Diversity (Indicate Citizenship of Parties in Item III)

III. CITIZENSHIP OF PRINCIPAL PARTIES (Place an "X" in One Box for Plaintiff and One Box for Defendant)

- | | PTF | DEF | | PTF | DEF |
|---|---------------------------------------|---------------------------------------|---|---------------------------------------|---------------------------------------|
| Citizen of This State | <input checked="" type="checkbox"/> 1 | <input type="checkbox"/> 1 | Incorporated or Principal Place of Business In This State | <input checked="" type="checkbox"/> 4 | <input type="checkbox"/> 4 |
| Citizen of Another State | <input type="checkbox"/> 2 | <input checked="" type="checkbox"/> 2 | Incorporated and Principal Place of Business In Another State | <input type="checkbox"/> 5 | <input type="checkbox"/> 5 |
| Citizen or Subject of a Foreign Country | <input checked="" type="checkbox"/> 3 | <input type="checkbox"/> 3 | Foreign Nation | <input type="checkbox"/> 6 | <input checked="" type="checkbox"/> 6 |

IV. NATURE OF SUIT (Place an "X" in One Box Only)

Click here for: Nature of Suit Code Descriptions.

CONTRACT	TORTS	FORFEITURE/PENALTY	BANKRUPTCY	OTHER STATUTES
<input checked="" type="checkbox"/> 110 Insurance <input type="checkbox"/> 120 Marine <input type="checkbox"/> 130 Miller Act <input type="checkbox"/> 140 Negotiable Instrument <input type="checkbox"/> 150 Recovery of Overpayment & Enforcement of Judgment <input checked="" type="checkbox"/> 151 Medicare Act <input type="checkbox"/> 152 Recovery of Defaulted Student Loans (Excludes Veterans) <input type="checkbox"/> 153 Recovery of Overpayment of Veteran's Benefits <input type="checkbox"/> 160 Stockholders' Suits <input type="checkbox"/> 190 Other Contract <input type="checkbox"/> 195 Contract Product Liability <input type="checkbox"/> 196 Franchise	PERSONAL INJURY <input checked="" type="checkbox"/> 310 Airplane <input checked="" type="checkbox"/> 315 Airplane Product Liability <input checked="" type="checkbox"/> 320 Assault, Libel & Slander <input checked="" type="checkbox"/> 330 Federal Employers' Liability <input checked="" type="checkbox"/> 340 Marine <input type="checkbox"/> 345 Marine Product Liability <input type="checkbox"/> 350 Motor Vehicle <input type="checkbox"/> 355 Motor Vehicle Product Liability <input checked="" type="checkbox"/> 360 Other Personal Injury <input checked="" type="checkbox"/> 362 Personal Injury - Medical Malpractice	<input checked="" type="checkbox"/> 365 Personal Injury - Product Liability <input checked="" type="checkbox"/> 367 Health Care/Pharmaceutical Personal Injury Product Liability <input checked="" type="checkbox"/> 368 Asbestos Personal Injury Product Liability PERSONAL PROPERTY <input type="checkbox"/> 370 Other Fraud <input type="checkbox"/> 371 Truth in Lending <input checked="" type="checkbox"/> 380 Other Personal Property Damage <input type="checkbox"/> 385 Property Damage Product Liability	<input checked="" type="checkbox"/> 625 Drug Related Seizure of Property 21 USC 881 <input type="checkbox"/> 690 Other LABOR <input checked="" type="checkbox"/> 710 Fair Labor Standards Act <input checked="" type="checkbox"/> 720 Labor/Management Relations <input type="checkbox"/> 740 Railway Labor Act <input type="checkbox"/> 751 Family and Medical Leave Act <input checked="" type="checkbox"/> 790 Other Labor Litigation <input type="checkbox"/> 791 Employee Retirement Income Security Act IMMIGRATION <input checked="" type="checkbox"/> 462 Naturalization Application <input checked="" type="checkbox"/> 465 Other Immigration Actions	<input type="checkbox"/> 422 Appeal 28 USC 158 <input type="checkbox"/> 423 Withdrawal 28 USC 157 PROPERTY RIGHTS <input type="checkbox"/> 820 Copyrights <input type="checkbox"/> 830 Patent <input type="checkbox"/> 835 Patent - Abbreviated New Drug Application <input type="checkbox"/> 840 Trademark SOCIAL SECURITY <input type="checkbox"/> 861 HIA (1395ff) <input type="checkbox"/> 862 Black Lung (923) <input type="checkbox"/> 863 DIWC/DIWW (405(g)) <input type="checkbox"/> 864 SSID Title XVI <input type="checkbox"/> 865 RSI (405(g)) FEDERAL TAX SUITS <input type="checkbox"/> 870 Taxes (U.S. Plaintiff or Defendant) <input type="checkbox"/> 871 IRS—Third Party 26 USC 7609
REAL PROPERTY <input type="checkbox"/> 210 Land Condemnation <input type="checkbox"/> 220 Foreclosure <input checked="" type="checkbox"/> 230 Rent Lease & Ejectment <input type="checkbox"/> 240 Torts to Land <input type="checkbox"/> 245 Tort Product Liability <input type="checkbox"/> 290 All Other Real Property	CIVIL RIGHTS <input checked="" type="checkbox"/> 440 Other Civil Rights <input type="checkbox"/> 441 Voting <input checked="" type="checkbox"/> 442 Employment <input checked="" type="checkbox"/> 443 Housing/Accommodations <input type="checkbox"/> 445 Amer. w/Disabilities - Employment <input type="checkbox"/> 446 Amer. w/Disabilities - Other <input type="checkbox"/> 448 Education	PRISONER PETITIONS Habeas Corpus: <input type="checkbox"/> 463 Alien Detainee <input type="checkbox"/> 510 Motions to Vacate Sentence <input checked="" type="checkbox"/> 530 General <input type="checkbox"/> 535 Death Penalty Other: <input type="checkbox"/> 540 Mandamus & Other <input type="checkbox"/> 550 Civil Rights <input type="checkbox"/> 555 Prison Condition <input type="checkbox"/> 560 Civil Detainee - Conditions of Confinement	<input type="checkbox"/> 375 False Claims Act <input type="checkbox"/> 376 Qui Tam (31 USC 3729(a)) <input type="checkbox"/> 400 State Reapportionment <input type="checkbox"/> 410 Antitrust <input checked="" type="checkbox"/> 430 Banks and Banking <input type="checkbox"/> 450 Commerce <input type="checkbox"/> 460 Deportation <input type="checkbox"/> 470 Racketeer Influenced and Corrupt Organizations <input type="checkbox"/> 480 Consumer Credit <input type="checkbox"/> 490 Cable/Sat TV <input checked="" type="checkbox"/> 850 Securities/Commodities/Exchange <input type="checkbox"/> 890 Other Statutory Actions <input type="checkbox"/> 891 Agricultural Acts <input type="checkbox"/> 893 Environmental Matters <input checked="" type="checkbox"/> 895 Freedom of Information Act <input type="checkbox"/> 896 Arbitration <input type="checkbox"/> 899 Administrative Procedure Act/Review or Appeal of Agency Decision <input type="checkbox"/> 950 Constitutionality of State Statutes	

V. ORIGIN (Place an "X" in One Box Only)

- ☒ 1 Original Proceeding
- ☐ 2 Removed from State Court
- ☐ 3 Remanded from Appellate Court
- ☐ 4 Reinstated or Reopened
- ☐ 5 Transferred from Another District (specify)
- ☐ 6 Multidistrict Litigation - Transfer
- ☐ 8 Multidistrict Litigation - Direct File

VI. CAUSE OF ACTION

Cite the U.S. Civil Statute under which you are filing (Do not cite jurisdictional statutes unless diversity):

Brief description of cause:

VII. REQUESTED IN COMPLAINT:

☐ CHECK IF THIS IS A CLASS ACTION UNDER RULE 23, F.R.Cv.P.

DEMAND \$

CHECK YES only if demanded in complaint:

JURY DEMAND: ☐ Yes ☐ No**VIII. RELATED CASE(S) IF ANY**

(See instructions):

JUDGE

DOCKET NUMBER

DATE

SIGNATURE OF ATTORNEY OF RECORD

FOR OFFICE USE ONLY

RECEIPT # _____ AMOUNT _____ APPLYING IFP _____ JUDGE _____ MAG. JUDGE _____